

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application No.	09/846,449
Filing Date	April 30, 2001
First Named Inventor	Han C. Wen
Art Unit	2665
Examiner Name	Hsu, Alpus
Attorney Docket Number	3997P005
Total Number of Pages in This Submission	14

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<div>Return postcard.</div>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> PTO/SB/08		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

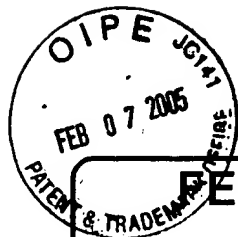
### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Chze Koon Chua, Reg. No. 53,831
	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	February 1, 2005

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Vineta T. Tufono		
Signature		Date	February 1, 2005



# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/846,449
Filing Date	April 30, 2001
First Named Inventor	Han C. Wen
Examiner Name	Hsu, Alpus
Art Unit	2665
Attorney Docket No.	3997P005

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 200.00

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
12	20*	0	\$0.00
4	3*	1	\$200.00
Multiple Dependent			
Large Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	50	2202	25
1201	200	2201	100
1203	360	2203	180
1204	300	2204	150
1205	300	2205	150
Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	50	2202	25
1201	200	2201	100
1203	360	2203	180
1204	300	2204	150
1205	300	2205	150
Fee Description			
Claims in excess of 20			
Independent claims in excess of 3			
Multiple Dependent claim, if not paid			
**Reissue independent claims over original patent			
**Reissue claims in excess of 20 and over original patent			
SUBTOTAL (1)			
(\$)			
200.00			

\*\*or number previously paid, if greater, For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)					
(\$)					

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Chze Koon Chua	Registration No. (Attorney/Agent)	53,831	Telephone	(408) 947-8200
Signature		Date	02/01/05		



2665  
JRV

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 09/846,449

Confirmation No.: 4454

Applicants: Wen, et al.

Filed: 04/30/2001

Art Unit: 2665

Examiner: Hsu, Alpus

Docket No.: 3997P005

Customer No.: 08791

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on February 1, 2005  
Date of Deposit

Vineta T. Tufono  
Name of Person Mailing Correspondence

Signature

02/01/2005  
Date

Mail Stop: AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT AND RESPONSE TO THE OFFICE ACTION**

Sir:

In response to the Office Action of November 1, 2004, the Applicants respectfully request the Examiner to enter the following amendments and consider the following remarks:

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.

02/10/2005 MBELETE1 00000040 09846449

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